PROCEDURES FOR COMPLETING AN APPLICATION

Before preparing your application, please read the following instructions carefully and provide all information requested.

- The application should include the following sections, with clearly marked headers, in this order: **COVER PAGE, Background, Proposal, Evaluation, Collaborations, Board, Staff, Finances and Progress Report**. Specific directions on each section follow later in these instructions.

- **The application should be no more than ten one-sided pages in length,** in addition to the Cover Page, which should include no information other than that specifically requested in the following directions. This does not include the Certificate of Tax Exempt Status (see page 9) form which you will need to fill out and return with your application. **Please number the pages of your application.**

- Use 1 inch margins and nothing smaller than a 12 point font size, single-spaced.

- Do not enclose your application in a binder or copy it onto colored paper.

- Handwritten applications are not accepted.

- If unable to replicate tables, please list information in similar format.

*If you have any problems or questions in **completing the application**, please call the McCormick Foundation offices at (312) 445-5044.*

COVER PAGE

_____

Please provide the following information. You may either use a typewriter to fill out this Cover Page for submission, or you may recreate this page on your computer, using the same headings listed below. Please be sure to number the pages in your application.

Organization Name: (as it appears on the current IRS Tax Exemption letter)

DBA (Doing Business As): (if applicable)

Street Address:

City: **State:**   **Zip:**

Telephone: **Fax:**

Chief Executive Officer: **Title:**

Proposal Contact Person: (if different than the chief executive officer)

Proposal Contact Person Title:

Proposal Contact Person Telephone: **(Ext:)**

E-mail:

Amount Requested: $

Type of support: (_general_ or _program_)

Program name: (for program requests only)

Organization Budget: (for year of grant) $

Program Budget, if applicable: (for year of grant) $

_____

For Fund Partner use only. Do not write below this line. Include this information if you recreate this form.

Sun Sentinel Children's Fund
Recommended amount:_____   Check one: Board _____ PA _____
Site visit: Yes/No date: _____   Check <u>one</u> below for guideline fit:

	Child Abuse Prevention and Treatment
	Child/Youth Education
	Housing
	Hunger

APPLICATION DIRECTIONS

In **a maximum of ten one-sided** pages, please provide information in each of the areas discussed below. Label each section of your proposal using the eight categories presented in bold in the following instructions. Organize the sections of your proposal in the following order: **Background, Proposal, Evaluation, Collaborations, Board, Staff, Finances,** and **Progress Report**. Please number the pages of your application.

BACKGROUND

In **no more than ten lines**, please describe the background and mission of your organization, incorporating the following points:

1. The year the organization began providing services to its clients.

2. A brief summary of its history.

3. Statement of its purpose, goals and objectives.

4. A description of current main programs, including unduplicated number of clients served during the most recently completed fiscal year.

5. The geographic area(s) served by the organization and its programs.

PROPOSAL

The McCormick Foundation awards both general support and project-specific grants. If you are requesting general support, be sure to convey a clear sense of the organization and its upcoming activities when filling out the Proposal section.

1. Provide a brief description of the program.

2. What are your specific goals and objectives? What is your timetable for accomplishing them?

3. If approved, how would this grant help your organization achieve its program goals and objectives? Also, explain how the funds would be used.

4. In one paragraph, describe the problem this proposal attempts to address, specific to your community. When possible, cite specific statistics and/or studies. Include the year of the data source and/or study.

5. Briefly respond to the following questions:
   a. How does your agency/or program specifically move people/program participants out of poverty and on to a pathway towards self-sufficiency?
   b. What is the strongest link between your program and poverty alleviation?

6. Describe the target population to be served. Please include the following breakdown*:*

- Numbers served **in last fiscal year:**

#	Clients served in program (if applying for program support)
#	Clients served in organization

- Economic status: What percent of the total number of clients served in the organization is low income/working poor?

%	Low income/Working poor

- Racial/ethnic composition:

%	African American
%	Asian
%	Caucasian
%	Latino
%	Other
100%	

- Gender:

%	Female
%	Male
100%	

EVALUATION

1. Provide the following information with data from the **most recently completed fiscal year**. For **program proposals**, complete for the requested program. For **general support proposals**, complete for the overall organization.

   (SEE REFERENCE PAGE SIX FOR FURTHER INFORMATION)

	Most recently completed fiscal year.
Program Goal(s)	
Output(s)	
Measurement Tool(s)	
Outcome(s)	

2. Please provide the following information describing projected goals and outcomes for the **current program year**.

Program Goal(s)	
Projected Output(s)	
Measurement Tool(s)	
Projected Outcome(s)	

COLLABORATIONS
1. Share any significant collaborations and/or networking relationships you have with other organizations, particularly those linked to the grant request.

BOARD
1. Describe the current composition of your board in terms of gender and race/ethnicity, and describe any successful strategy in meeting board-level inclusiveness goals.

2. If your organization has recently developed a strategic plan, briefly describe its main components.

STAFF
1. Describe the composition of your staff in terms of gender and race/ethnicity.

2. For **program proposals**, list the names and qualifications of the individuals who will direct the program. For **general support proposals**, list the names and qualifications of key staff members.

3. Briefly describe any recent training opportunities in which your staff participated that enhanced their ability to carry out the work outlined in this proposal.

FINANCES
Based on the information presented in your **most recently completed** audit, please answer the following questions, if applicable.

1. **If your organization's current liabilities exceeded its current assets** during the most recently completed fiscal year, please provide an explanation. Include the plan to rectify this situation.

2. **If your organization operated at a deficit** during the most recently completed fiscal year, please provide an explanation. Include the plan to rectify this situation. This question refers to the ratio between unrestricted revenues and unrestricted expenses.

3. **If your organization's administrative and fundraising (unrestricted) expenses totaled more than 30% of its total unrestricted expenses** during the most recently completed fiscal year, please provide an explanation.

PROGRESS REPORT

1. Did you receive funding from the McCormick Foundation within the last 18 months? If so, please list the fund from which you received the grant, the amount of the grant, and the date you received the grant.

2. If you received **general support** funding from the McCormick Foundation within the last year, explain how monies from that grant have been spent to date.

3. If you are applying for **specific program support** and have received funding from the McCormick Foundation within the last year for this same program, explain how monies from that grant have been spent to date.

ADDITIONAL INFORMATION

If there is any other relevant information you wish to provide in support of this request please do so in this section. This information may include recent major accomplishments, uniqueness of board and/or staff, significant training opportunities for board and/or staff, statistics or studies that demonstrate community need or program effectiveness, etc.

REFERENCE PAGE

This information is intended to assist with the completion of the application's Evaluation section. Examples are not all-inclusive, and will vary by program.

Goals: Purpose of the program

Outputs: The number of activities, participants and/or products involved in the program

Measurement Tools: Methods used to track outcomes

Outcomes: Benefits for participants during and after program activities; specific and measurable changes in attitude, behaviors or conditions

Children's Abuse Prevention and Treatment Examples

Child Trauma Treatment Program Example

Program Goal	Eighty percent of children will demonstrate reduced symptoms related to traumatic events
Outputs	Eighty-six children participated in individual and group therapy sessions
Measurement Tool	Trauma Symptom Checklist for Children (pre and post); Parent report and Counselor observation as documented in the Family Log
Outcomes	Ninety-five percent of children demonstrated decreased symptoms, maladaptive beliefs, and attributions related to their traumatic experiences by seventy-five percent

Positive Parenting Program Example

Program Goal	Eighty percent of parents will show improvement on positive parenting beliefs; 100% of families have no indications or reports of child abuse and/or neglect, 80% of parents decrease risk/stress factors
Outputs	Seventy-six families participated in weekly home visits and group sessions
Measurement Tool	Adult-Adolescent Parenting Inventory (pre & post); client case records; Risk Factor Screening and Assessment
Outcomes	Eighty percent of parents reported an improvement on positive parenting beliefs and expectations in at least one category of the Adult & Adolescent Parenting Inventory; ninety percent of families had no indications or reports of child abuse and/or neglect; seventy percent of parents decreased risk/stress factors

Child/Youth Education Program Examples

Academic Enhancement & High School Graduation Program

Program Goal	The after school program is designed to enable low income high school students with academic and social challenges to graduate and enroll in post-secondary education.
Outputs	One hundred seventy students attended three one-hour tutoring classes three times per week, in addition to violence prevention and life skills workshops; juniors and seniors participated in the college prep track, including test prep classes, college field trips and financial aid/college application assistance with parents
Measurement Tool	Attendance reports; CPS data; standardized pre- and post- tests; weekly review of student goals
Outcomes	Seventy-four percent of thirty-five high school seniors graduated, and eighty-five percent of graduates enrolled in post-secondary programs; Sixty-five percent of 135 non-seniors improved their standardized math and reading scores above grade levels, twenty-five percent made incremental grade level gains, and ten percent missed the post- test.

Children's Literacy Tutoring Program

Program Goal	The after school program is designed to help students at below grade levels to improve their reading skills to equal or above grade levels.
Outputs	Of forty total participants, thirty-two 3rd to 5th grade students completed an average of three, one-hour after-school literacy sessions per week, for thirty-two weeks. All thirty-two students were pre- and post-tested.
Measurement Tool	Diagnostic Online Reading Assessment (DORA), a comprehensive standardized tool
Outcomes	Seventy-five percent of the students' post-test scores reported an average increase of 1.0 to 1.5 reading grade levels after ninety-six instruction hours; Twenty percent raised their reading scores an average of 0.5 grade levels; and five percent made incremental gains.

Housing/Homelessness Program Examples

Supportive and Transitional Housing Program Example

Program Goal	To move homeless families to more permanent housing with support services
Outputs	35 homeless families in shelter program participated in services
Measurement Tool	Case files, data base tracking housing location, follow-up case management confirming housing situations
Outcomes	75 percent of families served moved to more permanent housing and remained housed for at least 12 months

Homeless Prevention Program Example

Program Goal	Preventing homelessness
Outputs	$10,000 given to 18 families for rent/mortgage and utility assistance; Heads-of-families attended financial management workshop
Measurement Tool	Documentation of case management records
Outcomes	80% of families served remain housed after six months

Hunger Program Examples

Community Network Program Example

Program Goal	To provide perishable and non-perishable food products from the agency's food pantry to 100 low income family heads-of-households per month. Agency staff meet with clients to determine eligibility for government programs and other social services, as needed. Staff encourages clients to attend healthy nutrition workshops and activities.
Outputs	One hundred income-eligible clients received food bags commensurate with family size, nearly fifty percent of clients attended nutrition workshops, and all clients received fresh produce, fruits, dairy products and meats once-per-month. Of all clients served, thirty percent met eligibility requirements for government hunger programs, including food stamps, and forty percent of all clients received referrals for medical, counseling, literacy, legal and job training services.
Measurement Tool	Daily food distribution reports on quantity, types and quality; staff reports; monthly surveys.
Outcomes	Seventy percent of the food distributed to clients met quality nutritional standards; On average, clients who attended nutrition workshops scored eighty-nine percent on pre- and post-surveys that measured their gains in knowledge about healthy foods, diet and/or food preparation

Childhood Hunger Program Example

Program Goal	To provide nutritious meals and nutrition workshops to sixty-five low income students, ages six to fifteen, as part of a safe and supervised after school tutoring program.
Outputs	Ninety percent of participating students attended the meals and nutrition education component of the after school tutoring program; students consumed more than 9,000 hot meals.
Measurement Tool	Daily meal distribution reports; pre- and post-tests; monthly surveys.
Outcomes	On average, students scored eighty-nine percent on pre- and post-tests that measured their gains in knowledge about healthy eating, hygiene and lifestyle; all meals met child nutrition standards and were prepared by certified food staff/nutritionist in a licensed kitchen.

MATERIALS TO SUPPORT APPLICATION

Please include copies of the following documents with your completed application. Indicate that these documents are included in your application by checking the appropriate boxes below and returning this page in your application packet. **Applications submitted without these materials will be considered incomplete.**

◊ Certificate of Tax Exempt Status form (see page seven) completed by an officer of your organization indicating that your tax exempt status is current.

◊ IRS 501(c)(3) – most recent federal tax exempt determination letter.

◊ Most recent audited financial statements. Only if your organization does not produce a yearly audit, please provide the most recent IRS Form 990.

◊ Line-item budget for the organization for the year of the grant request. **Also include a line-item program budget, if the proposal is for a specific program.**

◊ A list of members of the board of directors of the organization, including principal business or professional affiliation of each. Addresses and phone numbers need not be included.

◊ A list of the five largest grants received from corporations and/or foundations **during the same fiscal year of the audit/990** included with this application. Include the dollar amount contributed by each corporation and foundation, and provide the total amount given by foundations and corporations at the end of the list. **Do not include** in-kind donations, or contributions made by individuals or government.

◊ Annual report, if available.

CERTIFICATION OF TAX EXEMPT
STATUS OF GRANTEE ORGANIZATION

I, an Officer/Director of

_____
(Organization)

hereby certify that the organization has received a ruling from the Internal Revenue Service that it is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code.

I further certify that said exemption rulings from the Internal Revenue are still in effect and have not been revoked or amended.

_____
(Signature)

_____
(Title)

Date: